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<u> </u>	nder the Paperw	ork Reduction Act	of 1995, n	o persons are req	uired to respond	to a collection of	information unle	ess it displ	ays a valid OMB	control number.
L	PA	Application or Docket Number								
		CLAIMS AS	S FILED	SMAL	L ENTITY	OR	OTHER THAN SMALL ENTITY			
FOR NUMBER				NUMB	ER EXTRA	RATE	FEE	]	RATE	FEE
	SIC FEE CFR 1.16(a))						s	OR		s
	AL CLAIMS CFR 1.16(c))		minus 2	0 = .		x \$ =		OR	x \$ =	
IND	EPENDENT CLA	IMS		<b>→</b> .4		x \$ _ =		1	<del></del>	<del> </del>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								OR		<del> </del>
					+5=	<del></del>	OR	_ = _ =		
"`	ne dinerence in	column 1 is less th	an zero, e	nter "U" in column	TOTAL	<u> </u>	OR	TOTAL	L	
CLAIMS AS AMENDED - PART II  (Caluma 2)  OR  OTHER										
_		(Column 1) · CLAIMS	1	(Column 2)	(Cellumn 3)	SMAL	_ ENTITY	1	SMALL	ENTITY
NT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
) M	Total (37 CFR 1.16(c))	6	Minus	28	-	X.\$_ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(b))	. '/	Minus	<sup></sup> 3	-	x \$=		OR	x \$=	
Α	FIRST PRESEN	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	+\$ =		OR	+\$ =		
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			•		h-m-ru
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x s =	
₹	FIRST PRESENT	ATION OF MULTIPLE	E DEPEND	ENT CLAIM (37 CF	+s =		OR	+ \$ =		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ĕ.	Total (37 CFR 1.16(c))	•	Minus	••	=	x \$=		OR	x \$=	
필	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	x \$=	
₹	FIRST PRESENT	ATION OF MULTIPLE	+ \$ =		OR	+ \$ =				
					TOTAL ADD'L FEE	·	OR	TOTAL ADD'L FEE		
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number round in the appropriate Social Section of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

/ Application or Docket Number											ber				
	PATENT APPLICATION FEE DETERMINATION RECORD									1.10/7/7/63					
Effective October 1, 2003 X-11441 US/139 03 4u												70,			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OR	OTHER THAN SMALL ENTITY			
TO	TAL CLAIMS		11					RAT	Έ	FEE		RATE	FEE		
FO	R		NUMBER F	UMBER FILED .		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			// min	us 20=	• 0			X\$ :	)=		OR	X\$18=			
INDEPENDENT CLAIMS			<i>≱</i> , minus 3 =		·			X43	s		OŖ	X86=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+14	5=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOT	AL		OR	TOTAL	770	1	
	/ / CLAIMS AS AMENDED - PART II										•	OTHER SMALL			
<u>/0</u>	30 03	(Column 1)		(Colu		(Column 3)	1 1	SMA	ш,	ADDI-	OH	SMALL	ADDI-	┨.	
۷		CLAIMS REMAINING AFTER		NUM	BER	PRESENT EXTRA		RAT	Έ	TIONAL		PLATE	TIONAL	ľ	
Ē	,	AMENDMENT		PAID	FOR		1		-	FEE	•	X\$18 <sub>₹</sub>	FES	1	
AMENDMENT A	Total	• //	Minus	-0	<u>~</u>	-	-	X\$ 9	-		OR	-		ł	
AME	Independent	NTATION OF M	Minus	ENDEN	T CLAIM	[-	1	X43	=		OR	X86= `	<b>\</b>	-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+14	5=		ОЯ	+290≈			
1.1.								ADDIT.	TAL FEE		OR	ADDIT. FEE		1	
5	1/3/14	(Column 1)			mn 2)	(Column 3	<u> </u>				٠,		,	]	
	, , , ,	CLAIMS REMAINING		NŲM	HEST ABER	PRESENT		RAT	E	ADDI- TIONAL	<b>l</b> `	RATE	ADDI- TIONAL		
E		AFTER AMENDMENT			FOR	EXTRA			_	FEE		1	FEE	┨	
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ပ	`	CLAIMS REMAINING		HIG NU	HEST MBER 10USLY	PRESENT EXTRA		RA	Œ ·	ADDI- TIONAL		RATE	ADDI- TIONAL	.]	
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Š	Total	. 23	Minus	* '	2	- 3	‡	×s			OR		<del>                                     </del>	4	
AME	Independent	ENTATION OF M	Minus	PENDEA	T CLAIM		1	X4:	3=		OR	X86=		-	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+14	5=		OR	+290=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * ADDIT. FEE  ** ADDIT. FEE											]				
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." "If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															
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